



Good for employees, good for business!
www.AccessstoHealthInsurance.idaho.gov

Roles and Responsibilities

The Insurance Carrier Will:

- Be a registered vendor with the Department of Health and Welfare (DHW) (for information on how to become a vendor see www.AccessstoHealthInsurance.idaho.gov)
- Bill DHW for individuals approved for premium assistance

The Insurance Agent/Broker Will:

- Work for a registered vendor
- Follow steps to participate as outlined on web site (see www.AccessstoHealthInsurance.idaho.gov)
- Answer questions regarding health insurance plans

The Employer Will:

- Meet criteria for participation (see www.AccessstoHealthInsurance.idaho.gov)
- Follow steps to participate as outlined on the website
- Contact the Department of Health and Welfare immediately if you:
 - Change business address
 - Dis-enroll in the small group health plan
 - Close the business if the business is no longer operational
 - Have an employee who was receiving premium assistance but is no longer employed

The Department of Health and Welfare Will:

- Hold information meetings around the state to present program details
- Maintain a website with current, accurate information and forms
- Provide *Access to Health Insurance Premium Assistance Applications*, *envelopes* for the premium assistance applications, *Privacy Notices* and *Program Brochures* to insurance representatives upon request
- Maintain an online registration site at www.AccessstoHealthInsurance.idaho.gov where employers or their insurance representatives reserve slots for premium assistance
- Maintain a toll-free hotline number at 1-866-326-2485 to answer questions about the program

- Once the employer or the insurance representative registers online for premium assistance slots, DHW will contact the person who registered to confirm availability of slots and give the due date for applications to be received by DHW
- Process the completed *Access to Health Insurance Applications* once received to determine preliminary eligibility
- Send a *Conditional Approval Letter* listing approvals/denials by employer, and an *Employer Agreement* form for the employer to sign, to the insurance representative
- Once the *Conditional Approval Letter* and the *Employer Agreement* are received, DHW will send a *Notice of Decision Letter* to employees and the employer
- Facilitate the vendor payment process. Payment will be up to \$100 per month for each eligible employee, and up to \$100 per month on behalf of an employee's spouse and minor children (up to 3) who are enrolled.
- DHW is responsible for ongoing case maintenance
- Will contact the insurance representative annually to renew participation